FILED

1) 6 Summary (Orican Form 6 - Summary) (12/14)

JUL 2 8 2015

UNITED STATES BANKRUPTCY COURS BANKRUPTCY COURT EASTERN DISTRICT OF N.C. LOSIERA DISTRICT OF N.C.

Deena A Shar	P .
Dehtor	1

Case No.	15-	0388	3-	5-	DWN
	10.00				

Chapter 17

STIMMARY OF SCHEDULES

indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and I in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine he total amount of the debtor's habilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" is they life a case under chapter 7, 11, or 13.

NAME OF SCALEBUEL	ATTACHED (YES/NO)	NO. OF SULETS	ASSETS	CIAMÉTUS	OTHER
A - Real Property	V	1	148 324.0	5	
B. Personal dioperty	~	3	3307.49	1	
C - Projecty Connect as Example	V	4			
i) - Creditors (Ication Secure) Comes	L			99,848.83	
t Creaturs (Falking Unsecured Priority Crasis (Trist of Chans on Sensante 1.)	V			0.00	
F - Caroline Halding Guscou of Nonth July Claurs	V	i		6,777.98	
Considering Contracts and Unexpired Leises	V	1			
B - Codemois	1				
L. Current lucanic of Laday dain Depth (S)	L-	4			1934.98
1 - Carron Experdinges of Indimited Octoos(s)	~	4		control and the horizontal	1599.22
TOTAL		91	151,631.4	1 106,626.	81

B 6 Summary (Otheral Form 6 - Summary) (12/14)

	UNITED STAT	TES BANKRUPTCY COURT District of North Caroling
	Eastern	District of North Carolina
In to Deena A	Sharp,	Case No. 15 - 03883 -5-DMW
Debtor		Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

© Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Embility	Amount
Damestic Sapport Obligations (from Schedule E)	\$
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	S
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	S
Student Lean Obligations (from Schedule F)	\$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	s
TOTAL	s ()

State the following: Average Income (from Schedule I, Line 12)	181234.28
Average Expenses (from Schedule J, Line 22)	\$1599 22
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$ 875.00

tate the following:		
1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	And the state of t	\$0
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$	
5. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, II-ANY" column	-	\$ O -
4. Total from Schedule F		\$6,777.98
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$6,777.98

B6A (Official Form 6A) (12/07)

In re Deena A Sharp,

Case No. 15-03883-5-DM W

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "1," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

			. e f = " 1	
DÉSCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DERTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
home 1677 Acorn Ridge Rd Rocky Mt NC	want to remain living in it		142,503.89	94,028.27
Car 2002 Hyundai	need car to drive to work		5,820.16	5,820.16
			148324 05	

Total 148 0 004. 05. (Report also on Summary of Schedules.)

In re Deenad Sharp,

Case No. 15-03883-5-DMW

SCHEDULE B - PERSONAL PROPERTY

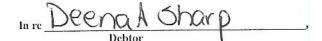
Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand.	1	\$20.00		\$30
2. Checking, savings or other finan- cial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home- stead associations, or credit unions, brokerage houses, or cooperatives.		Checking account - First South Bank		\$7.42
 Security deposits with public util- ities, telephone companies, land- lords, and others. 	X			
Household goods and furnishings, including audio, video, and computer equipment.	V	TV Blueau Player Computer bedroom		\$1700
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	<u>١</u>	TV Blueau Player Computer Bedroom furniture Couch table hutch, 6 chairs appliances		
6. Wearing apparel.	1	appliances 1		4,000
7. Furs and jewelry.	V	wedding ring, diamond		\$1050
8. Firearms and sports, photo- graphic, and other hobby equipment.	X	wedding ring, diamond, Costume jewelry		
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	Χ	J		
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such	X			ä

B 6B (Official Form 6B) (12/07) -- Cont.



Case No. 15 - 03883 - 5 - DMW

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
X			
X			2
X			8
X			
X			
X			
X			
*			
X			*
X			
	X X X X	O N OF PROPERTY X X X X X X X X X X X X	X X X X X X

B 6B (Official Form 6B) (12/07) -- Cont.

In re Deena A Sharp

Case No. 15-03883-5-DMW

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other ntellectual property. Give particulars. 23. Licenses, franchises, and other general ntangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	V	I do have some email addresses for people who get my usborne newsletki acoa Hyundai		
Automobiles, trucks, trailers, and other vehicles and accessories. Boats, motors, and accessories.	M	Janta Fe		
27. Aircraft and accessories.28. Office equipment, furnishings, and supplies.29. Machinery, fixtures, equipment,	X	I have books order forms and catalogs		around \$300.00
and supplies used in business. 30. Inventory.	X			40
31. Animals.32. Crops - growing or harvested.	×	a cats, I dag		7 30
Give particulars. 33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.35. Other personal property of any kind not already listed. Itemize.	×			
		a continuation sheets attached To	otal>	\$ 3307.40

(Include amounts from any continuation

sheets attached. Report total also on Summary of Schedules.)

Local Form No. 2 Rev. 9/97	UNITED EASTERN	STATES BANKRUPTCY COUR DISTRICT OF NORTH CAROLI	NA .	i - 03883-5-1
IN THE MATTER OF: $000000000000000000000000000000000000$	na A Sharp			CASE NUMBER:
Debtor(s)		- PROPERTY CLAIMED AS E		
North Carolina, and nonbankruptcy	Federal law:	erty as exempt pursuant to 11 L		
NCGS 1C-16 PLOT (exemption not to exceed \$	01(a)(1) (NC Const., Article X, 5 10,000)	Section 2) REAL OR PERSONA	L PROPERTY USED AS A RES	
Description of Property and Address	Market Value	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>
	•			
	e	VALUE	OF REAL ESTATE CLAIMED A	S EXEMPT: \$.00
15	NAME OF A SECTION EN ASSESSION	n in one vehicle not to exceed \$1	1.500)	
Model, Year 2002 Hy of Style of Auto Sante Fe	undai Market Value 1753.00	Lien Holder Tim's Au	Amount of Lien to 5800.16	4067.16
		VALUE OF	MOTOR VEHICLE CLAIMED A	4 067.1 AS EXEMPT: \$.00
3. NCGS 1C-1601(a)(4 first four dependents). The number	4) (NC Const., Article X, Section er of dependents for exemption	1) PERSONAL OR HOUSEHO purposes is	LD GOODS (net value not to ex	ceed \$3,500 plus \$750 for
Description of Property	Market <u>Value</u>	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>
Clothing & personal Kitchen appliances				
Stove Refrigerator				
Freezer				
Washing machine Dryer				
China				
Silver Jewelry				
Living room furniture				
Den furniture				
Bedroom furniture Dining room furniture				
Lawn furniture				
Television Stereo Radio				
UCR Wideo Camera				
Musical Instruments				
Piano Organ Air conditioner				
All Conditioner				

Paintings/Art Lawn mower Yard tools Crops

Recreational equipment

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	4. NCGS 1C-1601(a)(5) To	OOLS OF TRADE (total net valu	e not to exceed \$750 in value).	*		
Description	<u>on</u>	Market <u>Value</u>	Lien Holder	Amount of Lien	Net <u>Value</u>	
(attach ac	dditional sheets if necessary	<i>(</i>)		VALUE CLAIMED AS E	EXEMPT: \$.00
	5. NCGS 1C-1601(a)(6) L	FE INSURANCE (NC Const., A	rticle X, Section 5)		Cas	sh
Description	on	<u>Insured</u>	Policy Number	<u>Beneficiary</u>	Val	
				2.		
	6. NCGS 1C-1601(a)(7) P	ROFESSIONALLY PRESCRIBE	ED HEALTH AIDS (Debtor or Debt	tor's Dependents, no limit on v	alue).	
Description	on			# B		
DEPEND	7. NCGS 1C-1601(a)(B) (ENT FOR SUPPORT, COM	COMPENSATION FOR PERSO MPENSATION NOT EXEMPT F	NAL INJURY OR DEATH OF A P ROM RELATED LEGAL, HEALTH	ERSON UPON WHOM THE E OR FUNERAL EXPENSE.	DEBTOR WAS	
	8. NCGS 1C-1601(a)(2) A	NY PROPERTY (total net value	not to exceed \$3,500 less any ar	mount used under NCGS 1C-1	601(1).	
	Salar Sa	(A)				v.
Description of Proper	on of ty & Address	Market <u>Value</u>	Lien <u>Holder</u>	Amount of Lien	Net Val	
the Intern	at annuities as described in stall Revenue Code. For purp 10. TENANCY BY THE E	Section 408(b) of the Internal Reposes of this subdivision, "Internations	OUNTS as described in Section 40 evenue Code, and accounts establed Revenue Code" means Code as try is claimed as exempt pursuant	olished as part of a trust descri s defined in G.S. 105-228.90.	ibed in Section 40	
Description		Market	Lien	Amount	Net	
Charles and Control of the Control	& Address	Value	<u>Holder</u>	of Lien	Value	
	11. NORTH CAROLINA P	ENSION FUND EXEMPTIONS				
a. b. c. d. e.	North Carolina Teachers a Firemen's Relief Fund pen Fraternal Benefit Society b Benefits under the Supple are exempt from levy, sale Benefits under the Supple	enefits NCGS 58-24-85 mental Retirement Income Plan , and garnishment NCGS 135-9 mental Retirement Income Plan	t benefits NCGS 135-9 for teachers and state employees for state law enforcement	S		
*	officers are exempt from le	evy, sale, and garnishment NCG			o evenor a	
			***************************************	IES PROPERTY CLAIMED A	S EXEMPI \$.00.
			THE STATE OF NORTH CAROL	IINA:		
a. b. c.	Aid to the Blind NCGS 11: Yearly Allowance of Surviv	ring Spouse NCGS 30-15	milaren NUGS 108A-36			
d.	Workers Compensation be	enefits NCGS 97-21				

f.	Unemployment benefits, so long as a necessities purchased while unemplogroup insurance proceeds NCGS 58 Partnership property, except on a clawages of debtor necessary for supplenefits under the Separate Insurant enforcement officers are exempt from Vested benefits under the North Carplan are exempt from levy, sale, and	oyed NCGS 96-17 -58-165 aim against the partn ort of family NCGS 1 ce Benefits Plan for: n levy, sale, and garr olina Public Employe	ership NCGS 59-55 -362 state and local law hishment NCGS 143-166.60(h) e Deferred Compensation		
				TOTAL PROPERTY CLAIM	IED AS EXEMPT \$.00
	13. FEDERAL PENSION FUND EX	EMPTIONS			
a. b. c. d. e. f.	Foreign Service Retirement and Dis Civil Service Retirement benefits 5 Railroad Retirement Act annuities at Veterans benefits 38 U.S.C. § 5301 Special pension paid to winners of C Annuities payable for service in the	U.S.C. § 8346 and pensions 45 U.S Congressional Medal General Accounting	of Honor 38 U.S.C. § 1562 Office 31 U.S.C. 776.		
	14. OTHER EXEMPTIONS CLAIME	ED UNDER NONBAN	KRUPTCY FEDERAL LAW:		
a. b. c. d. e. f. g.	Social Security benefits 42 U.S.C. Injury or death compensation payme Wages owing a master or seamen, children 46 U.S.C. § 11109 Longshoremen and Harbor Workers Crop insurance proceeds 7 U.S.C. § Public safety officers' death benefits Railroad unemployment insurance 4	ents from war risk ha except for support of compensation Act 1509 42 U.S.C. § 3796.	a spouse and/or minor death and disability benefits 3: See subsection (g).	3 U.S.C. § 916	
					5/5/197 4 0
			VA	LUE OF PROPERTY CLAIM	IED AS EXEMPT: \$.0
	15. The following tangible personal	property was purcha	ased by the debtor within ninet	ty (90) days of the filing of the	e bankruptcy petition:
			Lien	Amount	Net
Descripti	Market	34			
Descripti	Market	8	Lien	Amount	Net
Descripti	Market Value		Lien <u>Holder</u>	Amount	Net
a. b. c. d. e. f.	Market	of to the following class as provided by fedes subdivisions for taxed and performed for tone on the premises ted for the purchase a specific property affected of the prope	Lien Holder Holder ims: eral law. es, appearance bonds or fiduce he person claiming the exemp but only as to the specific pro of specific property. fected; provided, that the exer purchase money security inte	Amount of Lien ciary bonds; tion. but only as to the specifoperty affected. mptions shall apply to the deterst in any such goods.	Net Value fic property affected. btor's household goods

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None of the property listed in paragraph 15 has been included in this claim of exemptions.

None of the claims listed in paragraph 16 is subject to this claim of exemptions.

DATE: 7-18-15

Deena A Sharp

UNSWORN DECLARATION UNDER PENALTY OF PERJURY	ON BEHALF OF INDIVIDUAL TO SCHEDULE C - PROPERTY CLAIMED AS EXEMPT
I,	, declare under penalty of perjury that I have read the foregoing
Schedule C - Property Claimed as Exempt, consisting of	sheets, and that they are true and correct to the best of my knowledge,
information and belief.	
Executed on:	Debtor

B 6D (Official Form 6D) (12/0 7) In re	eena A Shar	P	,
In ic ·	Debtor	6	

Case No. 15-03883-5-DMW

Liabilities and Related

Data.)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doc, guardian." Do not disclose the child's name. Sec, 11 U.S.C. §112

and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of

these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D. UNSECURED HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF CLAIM DATE CLAIM WAS UNLIQUIDATED CREDITOR'S NAME AND PORTION, IF CONTINGENT WITHOUT CODEBTOR INCURRED, DISPUTED MAILING ADDRESS ANY DEDUCTING VALUE NATURE OF LIEN, INCLUDING ZIP CODE AND OF COLLATERAL AND AN ACCOUNT NUMBER DESCRIPTION (See Instructions Above.) AND VALUE OF PROPERTY SUBJECT TO LIEN ACCOUNT NO. 001004 7678 June 1995 94,028.67 estimated value 135,000 5,820.16 500.00 ROCKY Mount VALUE \$ ACCOUNT NO. VALUE \$ Subtotal > continuation sheets (Total of this page) attached Total ▶ (Use only on last page) (Report also on Summary of (If applicable, report Schedules.) also on Statistical Summary of Certain

B6E (Official Form 6E) (04/13)



Case No. 15 - 03883 - 5 - DMW

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are tisted on the attached sheets.)
Domestic Support Obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the

cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Deena A Sharp,

Case No. 15 - 03883 - 5 - DMW

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, NLIQUIDATED CONTINGENT CLAIM CODEBTOR INCURRED AND MAILING ADDRESS DISPUTED CONSIDERATION FOR INCLUDING ZIP CODE, CLAIM. AND ACCOUNT NUMBER IF CLAIM IS SUBJECT TO (See instructions above.) SETOFF, SO STATE. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)



Case No. 15-03883-5-DMW

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
	a a

In re Deena Sharp,

Case No. 15 - 03883-5 - DMW (if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

of

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR			NAME AND ADDRESS OF CREDITOR			
				-,		
	t s					
					6	

Fill in this information to identify	your case;					
Debtor: Deena Ar	rington 5	Sharp				
Debtor 2	faicale Name	Last Name				
(Spouse, if filing) First Name United States Bankruptcy Court for the:	Eastern	District of NC				
Case number 15 - 0388	3-5-DMW	1	-	Check if this	3 is:	
(It known)				An ame	nded filing	
				A supple	ement showing post-p 13 income as of the f	petition following date:
Official Form B 61				MM / DD /		
Schedule I: You	r Income					12/13
Be as complete and accurate as posupplying correct information. If you figure the separated and your spouseparate sheet to this form. On the Describe Employm	ou are married and not use is not filing with you top of any additional p	filing jointly, and you	rmation ab	out vour spou	se. If more space is ne	eded, attach a
Fill in your employment information.		Debtor 1	our start, was severous	an en general de la companya de la c	Debtor 2 or non-fili	ng spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employe	d		Employed Not employed	
Include part-time, seasonal, or self-employed work.	Occupation	parapro	Fess	ional		
Occupation may Include student or homemaker, if it applies.		Section	- Ha	Ma 1	10	
	Employer's name	Servino	3 110	105	<u> </u>	ne en e
	Employer's address	1159 N V	Nesle	yan Bl	VO Number Street	an a
		ROCKY N	lour	+		
		North (Caro	lina		
			an	804		
		City		Code	City	State ZIP Code
	How long employed t	there? 5 Mo	MAN	5		
Give Details About	t Monthly Income					
Estimate monthly income as of		orm. If you have nothin	no to renort	for any line, wri	te \$0 in the space. Inclu	de your non-filing
spouse unless you are separated						
If you or your non-filing spouse he below. If you need more space, a	ave more than one empl attach a separate sheet to	o this form.	matton tor	all elliployers to	that person on the line	
			F	or Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly	ary, and commissions , calculate what the mont	(before all payroll thly wage would be.	2. \$_	875.00	\$	
Estimate and list monthly ove	rtime pay.		3. +\$_	0	+ \$	
4. Calculate gross income. Add l	ine 2 + fine 3.		4. \$	875.00	\$	

Deena A Sharp

Case number
15-03883-5-DMW

attachment official form B61

Part 1 Employment

Employment status: part time
Occupation: child care provider
Employer's name: Down East
Partnership for Children
Address: Lexington Ave.
Rocky Mount, NC

Howlong employed: 2008 to present

Deena A Sharp case number 15 - 03883-5-DMW

attachment official Form B 61

Employment status: Self-employed Occupation: Educational consultant Employer's name: Deena A Sharp with Usborne Books and More

Address: (company headquarters) Usborne Books And More 10302 E 55th Place Tulsa, Oklahoma 14146-6515 How long: July 2013 to present

eutor 1 Deena A Sharp Fusi Namue Median Namue Loss Namue		Case number (#krown)	15-03883	-5-DMW
		For Debtor 1	For Debtor 2 or	
	83	2000	non-filing spouse	
Copy line 4 here	3 4.	\$ 075.00	\$	
List all payroll deductions:		C		
5a. Tax, Medicare, and Social Security deductions	5a.	s 84.7a	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance	5e.	\$	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+\$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	s_84.7a	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	<u>. 790.28</u>	\$	
List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	lent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation 8e. Social Security	8d. 8e.	\$ \$	\$	
8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps	ance 8f.	\$ 194.00	\$	
8g. Pension or retirement income (nothing this	8g.	\$	\$	
8h. Other monthly income. Specify: Baby 5i Hing month) 8h.	+\$250.00	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$494.00	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	s_i23#.at-	\$	= \$1234.2
11. State all other regular contributions to the expenses that you list in Sch Include contributions from an unmarried partner, members of your household other friends or relatives.	, your o	dependents, your roon		
Do not include any amounts already included in lines 2-10 or amounts that are	re not a	vailable to pay expens	ses listed in Schedule J.	. + \$
Specify:				
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Schedules.	Certair	Liabilities and Helate	d Data, if it applies 12	\$ 1334.21 Combined monthly income
13. Do you expect an increase or decrease within the year after you file thi				7 112
Myor Eveloin Langfilly my Listorne D	usi	ness will a	grow and	I Will get
Official Form B 61 Will need me Moragedule 1: Your	Incom		7co. 11150	page 2

Debtor 2 (Spouse, if filing) First Namo Mide United States Bankruptcy Court for the:	A Sharifallo Name Last Name Last Name District of DOMN Expenses	expenses a	ed filing ent showing post-pas of the following	date: because Debtor 2
Be as complete and accurate as possible information. If more space is needed, att	If two married people are filin	g together, both are equally resp On the top of any additional pag	onsible for supplyings, write your name	ng correct and case number
(if known). Answer every question.				
Part () Describe Your Househo	ld			
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separa No Yes. Debtor 2 must file a se				
Tel.	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. Do not state the dependents' names.	each dependent	daughter	9	No Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	No Yes			
Par 2 Estimate Your Ongoing M	onthly Expenses	100 AM		
Estimate your expenses as of your bank expenses as of a date after the bankrupt applicable date. Include expenses paid for with non-cast of such assistance and have included it 4. The rental or home ownership expensary rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's the maintenance, repair, and used. Homeowner's association or conditions.	truptcy filing date unless you a cy is filed. If this is a supplement on Schedule I: Your Income (Coses for your residence. Include s insurance	ental <i>Schedule J</i> , check the box a I know the value Official Form B 6l.)	Your expe 4. \$ 635 4a. \$ 50 4c. \$ 100 4d. \$	n and fill in the

Debtor 1

Deena A Sharp

Case number (# known) 15 - 03683 - 5 - DMW

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$ 125.00
	6b. Water, sewer, garbage collection	6b.	\$ 52.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 38.∞
	6d. Other. Specify: home a internet	6d.	\$ 64.00
7.	Food and housekeeping supplies	7.	\$ 45.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$ 125.00
10.	Personal care products and services	10.	\$ 25.00
11.	Medical and dental expenses	11.	\$
. 12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 60.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s_22.00
14.	Charitable contributions and religious donations	14.	\$ 50.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ 57.00
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17	Installment or lease payments:	10.	
	17a. Car payments for Vehicle 1	17a.	\$ 250.00
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:		٠
	17d. Other. Specify:	17c.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$
19.			
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	ome.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues		\$

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Deblor 1 Deena A Sharp Case number (# And	own)	5-03883-5-
21. Other Specify:	21.	+\$
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22.	<u>s 1599.33</u>
23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	: 18 95 . 28
23b. Copy your monthly expenses from line 22 above.	23b.	-\$ 1599.20
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	s 369.98
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.		
Im not sure because selene has one modification request but I we to get one if possible. I have 19 mg my car payment.	al	a still like

UNITED STATES BANKRUPTCY COURT

In re: Deena A Sharp,

Case No. 15-03883-5-DMW

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

642.54 1400.75 3206.75 Down East Partnership for Children Serving Hands, LLC. Usborne Books and More

2

2. Income other than from employment or operation of business



State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

Complete a. or b., as appropriate, and c.

1

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

name and address of credition Selene Finance POBOX 422039 Houston, Texas

PAYMENTS

AMOUNT
PAID
SOO. OO

AMOUNT STILL OWING

Houston, Texas May (600 a month)

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made

within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225°. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF AMOUNT STILL OWING

TRANSFERS

^{*}Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID AMOUNT STILL OWING 3

4. Suits and administrative proceedings, executions, garnishments and attachments



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

OF ASSIGNEE

DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT

DATE OF ORDER

DESCRIPTION AND VALUE Of PROPERTY 4

CASE TITLE & NUMBER

7. Gifts



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON

OR ORGANIZATION

RELATIONSHIP TO DEBTOR,

DATE OF GIFT DESCRIPTION AND VALUE

IF ANY

OF GIFT

8. Losses



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART

DATE OF LOSS

BY INSURANCE, GIVE PARTICULARS PROPERTY

9. Payments related to debt counseling or bankruptcy



List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 5

10. Other transfers



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED



b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS - OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

. 6

12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR NAMES AND ADDRESSES OF THOSE WITH ACCESS

DESCRIPTION OF

DATE OF TRANSFER OR SURRENDER,

OTHER DEPOSITORY

TO BOX OR DEPOSITORY

CONTENTS

IF ANY

13. Setoffs



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor



If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

16. Spouses and Former Spouses



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF

ENVIRONMENTAL

NOTICE LAW



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF

ENVIRONMENTAL

LAW



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or

other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

Usborne Books and More LAST FOUR DIGITS
OF SOCIAL-SECURITY
OR OTHER INDIVIDUAL
TAXPAYER-I.D. NO.
(ITIN)/ COMPLETE EIN

3775

ADDRESS NATURE OF BUSINESS

home parties and sell to schools BEGINNING AND ENDING DATES

July 2013 present

8



b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements



a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED



b. List all firms or individuals who within **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS



d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

20. Inventories



a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

9



b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders



a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST PERCENTAGE OF INTEREST



If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE :

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

10

22. Former partners, officers, directors and shareholders



a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL



b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.



If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER-IDENTIFICATION NUMBER (EIN)

25. Pension Funds.



If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER-IDENTIFICATION NUMBER (EIN)

* * * * * *

B7 (Official Form 7) (04/13)		. 1
I declare under penalty of perjury and any attachments thereto and t		ned in the foregoing statement of financial affairs
Date 7-18-15	Signature of Debtor	Deena A Sharp
Date	Signature of Joint Debtor (if any)	· · · · · · · · · · · · · · · · · · ·
[If completed on behalf of a partnership	or corporation]	10
	have read the answers contained in the fore to the best of my knowledge, information	egoing statement of financial affairs and any attachments and belief.
Date	Signature	
	Print Name and Title	
[An individual signing on beh	alf of a partnership or corporation must in	licate position or relationship to debtor.]
B a	continuation sheets attached	
Penalty for making a false statement:	Fine of up to \$500,000 or imprisonment for u	o to 5 years, or both. 18 U.S.C. §§ 152 and 3571
I declare under penalty of perjury that: (1) I am a compensation and have provided the debtor with a c 342(b); and, (3) if rules or guidelines have been pro	bankruptcy petition preparer as defined in copy of this document and the notices and mulgated pursuant to 11 U.S.C. § 110(h) s	PETITION PREPARER (See 11 U.S.C. § 110) 11 U.S.C. § 110; (2) 1 prepared this document for information required under 11 U.S.C. §§ 110(b), 110(b), and etting a maximum fee for services chargeable by bankruptcy document for filing for a debtor or accepting any fee from
Director Control No. 1991 Co. 1991	Dubits Dust	N. W. W. T. H. HILLOGONIA
Printed or Typed Name and Title, if any, of Bankri If the bankruptcy petition preparer is not an individu responsible person, or partner who signs this docum	ual, state the name, title (if any), address, a	Security No. (Required by 11 U.S.C. § 110.) and social-security number of the officer, principal,
Address		
Signature of Bankruptcy Petition Preparer	Date	
Names and Social-Security numbers of all other indinot an individual:	viduals who prepared or assisted in prepare	ing this document unless the bankruptcy petition preparer is
If more than one person prepared this document, atta	ch additional signed sheets conforming to	the appropriate Official Form for each person
A bankruptcy petition preparer's failure to comp. fines or imprisonment or both. 18 U.S.C. § 156.		e Federal Rules of Bankruptcy Procedure may result in

	Sebla Debla Debla Spor	or 2 Se, if king) The Pane d States Benturuptcy Count for the: Eastern	Lind Number		1. There is no pr 2. The calculatio abuse applies Test Calculatio	esumption of abuse. In to determine if a presumption of will be made under Chapter 7 Means on (Official Form 22A-2).	
	Case (ii ko	number 15-03883-5-DMW				est does not apply now because of any service but it could apply later.	
L	-				C) Check if this is	an amended filing	
(icial Form 22A-1			who size a serial size and a contract that a size of		
(1)	210	apter 7 Statement of Your C	Jurrent	Morethi	y income	12/1: наложивает принципального принципального принципального принципального принципального принципального принципал	الوحا
p D	nee age rima	complete and accurate as possible. If two married peoleded, attach a separate sheet to this form, include the list, write your name and case number (if known). If you builty consumer debts or because of qualifying military states (b)(2) (Official Form 22A-TSupp) with this form.	the mariniser to .		from a procumplic	on of abuse because you do not ha	WE
Lis	1, 1	What is your marital and filing status? Check one only.					
		Not married. Fill out Column A, lines 2-11.	O.l A	and B. Linne 2-11			
		Married and your spouse is filing with you. Fill out bo					
		[] Married and your spouse is NOT filing with you. You			one A and B lines	2-11	
		Living in the same household and are not legal Living separately or are legally separated. Fill o under penalty of perjury that you and your spouse are living apart for reasons that do not include eva-	ut Column A, lin are legally sepa ding the Means	es 2-11; do not rated under nor Test requireme	fill out Column B. B sbankruptcy law that nts. 11 U.S.C. § 707	y checking this box, you declare Lapplies or that you and your spouse ?(b)(7)(B).	
		Fill in the average monthly income that you received frecase. 11 U.S.C. § 101(10A). For example, if you are filing camount of your monthly income varied during the 6 months include any income amount more than once. For example, one column only. If you have nothing to report for any line,	add the incomi if both spouses	e for all 6 month own the same r	is and divide the tola	al by 6. Fill in the result. Do not	
		one column only. If you have nothing to report to lany line,	wille go in the o	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Column A Debtor 1	Column B Debtor 2 or non-filling spouse	
e' .	2	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	commissions!	(before all	\$ 875.00		
	3	Alimony and maintenance payments. Do not include pay Column B is filled in.	ments from a sp	oouse if	d)	\$	
	d	All emounts from any source which are regularly paid for you or your dependents, including child support. Including an unmarried partner, members of your household, you and roommates. Include regular contributions from a spous-filled in. Do not include payments you listed on line 3.	our dependents,	parents,	\$	45 43	
	5.	Net income from operating a business, profession, or i	íarm				
		Gross receipts (before all deductions)	\$				
		Ordinary and necessary operating expenses	- \$		~ en	g.	
	105	Net monthly income from a business, profession, or farm	\$	Copy here™	\$	V	
	6	Net income from rental and other real property Gross receipts (before all deductions)	\$				
		Ordinary and necessary operating expenses	- \$		ي.	S	
		Net monthly income from rental or other real property	\$	Copy here	Ø	4 ^b .3	
	7	Interest, dividencis, and royalties			Ÿ	**	

Gr 1 DEENG A ONG		Case number (# known)_	15-0388	3-5-17
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	enne Tillion (Africa) por para
Unemployment compensation		\$	\$	
Do not enter the amount if you contend that the amount			2.70	
under the Social Security Act. Instead, list it here: For you				
For your spouse				
Pension or retirement income. Do not include any a benefit under the Social Security Act.		\$	\$	
Income from all other sources not listed above. S Do not include any benefits received under the Socia as a victim of a war crime, a crime against humanity, terrorism. If necessary, list other sources on a separa	I Security Act or payments rec or international or domestic	ceived		
10a.	199%	\$	\$	
10b.	4	\$	\$	
10c. Total amounts from separate pages, if any.	95	+\$	+ \$	
Calculate your total current monthly income. Add column. Then add the total for Column A to the total for		\$875.00	+ _ sO	= \$75.00
Determine Whether the Means Test A	Applies to You			income
Calculate your current monthly income for the yea	r. Follow these steps:			COCAS
12a. Copy your total current monthly income from lin	ne 11	Сору	/line 11 here 12a.	\$ 817.00
Multiply by 12 (the number of months in a year)			Ann.	\$10,500.
126. The result is your annual income for this part of	the form.		12b.	\$10,500.
Calculate the median family income that applies to	you. Follow these steps:			
Fill in the state in which you live.	NC			
Fill in the number of people in your household.	a		r-	115 000
fill in the median family income for your state and size To find a list of applicable median income amounts, gr			13.	s 45, 906
nstructions for this form. This list may also be availab				
ow do the lines compare?				
Line 12b is less than or equal to line 13. On t Go to Part 3.	he top of page 1, check box 1	, There is no presumptio	n of abuse.	
Line 12b is more than line 13. On the top of p Go to Part 3 and fill out Form 22A-2.	age 1, check box 2, The pres	umption of abuse is dete	rmined by Form 22A-2.	
Sign Below				
By signing here, I declare under penalty of per	jury that the information on th	is statement and in any a	attachments is true and	correct.
2 Doonland Sharp)X			
Signature of Debtor 1		Signature of Debtor 2		5000
Date 07/18/2015		Date MM / DD / YYYY	2 ·	
If you checked line 14a, do NOT fill out or file h	Form 22A-2			
If you checked line 14b, fill out Form 22A–2 an				

Debtor 1 Deena A Sharp First Name Middle Name Light Name Debtor 2 (Spause, il filing) First Name United States Bankruptcy Court for the: Easkern District of (State) Case number (If known)	According to the calculations required by this Statement: 1. There is no presumption of abuse. 2. There is a presumption of abuse.
Official Form 22A-2 Chapter 7 Means Test Calculation	12/14
To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Be as complete and accurate as possible. If two married people are filing together, both are equ is needed, attach a separate sheet to this form, include the line number to which the additional is	ally responsible for being accurate. If more space
pages, write your name and case number (if known). [This is a Determine Your Adjusted Income	mormation applies. On the top of any distinction
Copy your total current monthly income	icial Form 22A-1 here >
2. Did you fill out Column B in Part 1 of Form 22A-1? I No. Fill in \$0 on line 3d. I Yes. Is your spouse filing with you?	
☐ No. Go to line 3. ☐ Yes. Fill in \$0 on line 3d.	
 Adjust your current monthly income by subtracting any part of your spouse's income not us household expenses of you or your dependents. Follow these steps: 	ed to pay for the
On line 11, Column B of Form 22A-1, was any amount of the income you reported for your spouse used for the household expenses of you or your dependents?	NOT regularly
☐ No. Fill in 0 on fine 3d. ☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support are subtracting from your spouse's income	
3a\$	
36	
3c \$	
3d. Totał. Add lines 3a, 3b, and 3c	Copy total here 🤏 3d. — \$
4. Adjust your current monthly income. Subtract line 3d from line 1.	\$

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Deblor 1

Deena A Sharp

Case number (# Known) 15 - 03883-5 - DMW

Tricker.

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 22A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

Mational Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

4) a:

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

Out-of-pocket health care allowance per person

- 200

7b. Number of people who are under 65

x 2

7c. Subtotal. Multiply line 7a by line 7b.

Copy line 7c

opy line 7c

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

._O_

Number of people who are 65 or older

X_O

7f. Subtotal. Multiply line 7d by line 7e.

Copy line 7f

+ \$ 0

7g. Total. Add lines 7c and 7f.....

\$_____

Copy total here 7g. \$_____

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Debtor 1

Deena A Sharp

Case number (4 house) 15 - 03883-5-DMW

		11.00		
Local Stan	dards You must use the IRS Local Standards to a	answer the questions	in lines 8-15.	
	nformation from the IRS, the U.S. Trustee Program into two parts:	has divided the IRS	Local Standard for housing	g for bankruptcy
© Housing	g and utilities — Insurance and operating expenses g and utilities — Mortgage or rent expenses			
To answer	the questions in lines 8-9, use the U.S. Trustee Pro	gram chart.		
To find the bankruptcy	chart, go online using the link specified in the separate clerk's office.	instructions for this fo	orm. This chart may also be a	vailable at the
8. Housing dollar a	g and utilities – Insurance and operating expenses: mount listed for your county for insurance and operatin	Using the number of g expenses.	people you entered in line 5,	fill in the \$
9. Housin	g and utilities – Wortgage or rent expenses:			
9a. Usu for y	ng the number of people you entered in line 5, filt in the your county for mortgage or rent expenses.	dollar amount listed	9a. \$	
95. Tota	al average monthly payment for all mortgages and othe	er debts secured by ye	our home.	
con	calculate the total average monthly payment, add all an tractually due to each secured creditor in the 60 month ikruptcy. Then divide by 60.	nounts that are s after you file for	2	
N.	nme of the creditor	Average monthly payment		8
10 <u>22</u>	1.	\$		
		er.		
Long		ъ <u></u>		*
	2	+ \$		
5 		- Magazini, and an analysis of the second second		Repeat this
	9b. Total average monthly payment	\$ \$	Copy line 9b -\$	amount on line 33a.
	et mortgage or rent expense.		v in the second of	
Si re	ubtract line 9b (total average monthly payment) from lin int expense). If this amount is less than \$0, enter \$0.	e 9a (mortgage or	9c. \$	Copy line Sc \$ here
10. If you o	claim that the U.S. Trustee Program's division of th culation of your monthly expenses, fill in any addit	e IAS Local Standar ional amount you cl	d for housing is incorrect a aim.	nd affects \$
Explain why:				
\$500 april 100 april			a an ownership or operation of	waonse
	ransportation expenses: Check the number of vehicle	es for which you claim	an ownership or operating e	хрепос.
	Go to line 14.			
	or more. Go to line 12.			
12. Vehick operati	e operation expense: Using the IRS Local Standards a ang expenses, fill in the Operating Costs that apply for y	and the number of ve your Census region of	hicles for which you claim the r metropolitan statistical area.	\$

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Debtor I

1		Λ	41	_	1 2	
1)66	na	1	\mathcal{O}	7a	rO	
0	Adietatic Isla	nest.		ert Macrae	-	

Case number (1 known) 15 - 03883-5-DMW

Vehi	icle 1 Describe Vehicle 1:	2002	Hyundai	Santo	Fc		
						_	
13a.	Ownership or leasing costs u	sing IRS Local Star	ndard	13a.	\$		
13b.	Average monthly payment to Do not include costs for least		by Vehicle 1.				
	To calculate the average mo- amounts that are contractual after you filed for bankruptcy.	y due to each secur	red creditor in the 60 mo	nths			
	Name of each creditor for	Vehicle 1	Average monthly payment	. E			
	Tim's Aut	50	s 250	Copy 135 here	-s 250	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or le. Subtract line 13b from line 13.	Section States and Section 1997	ess than \$0, enter \$0.	13c.	\$	Copy net Vehicle 1 expense here	\$
/eh	icle 2 Describe Vehicle 2:			-1:			
30,	Ownership or leasing costs u	sing IRS Local Star	ndard	13d.	\$	_	
3e.	Average monthly payment fo include costs for leased vehice		by Vehicle 2. Do not				
	Name of each creditor for	Vehicle 2	Average monthly payment				
			\$	Copy 13e	- \$	Repeat this amount on line 33c.	
13i.	Net Vehicle 2 ownership or lea Subtract line 13e from 13d. If		than \$0, enter \$0.	13f.	\$	Copy net Vehicle 2 expense	q.
ubli Tran	ic transportation expense: If sportation expense allowance	you claimed 0 vehic regardless of wheth	des in line 11, using the deriversity or use public transp	RS Local Standa	ards, fill in the Pub	here %	\$
		900 € 0000 000 0000 000 000 000 000 000			**	•	2.1.1 (man and a man
ddi edu	tional public transportation e ict a public transportation expe	nse, you may fill in v	what you believe is the a	n line 11 and if y ppropriate expei	ou ciaim that you ise, but you may r	may also not claim	
		or Public Transport	ation				

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Debtor 1 Deena A Sharp

24. Add all of the expenses allowed under the IRS expense allowances.

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		9
Of	ther Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.	
16	5. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self- employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.	<u> </u>
	Do not include real estate, sales, or use taxes.	
17	 Invofuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 	
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$
18	B. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$
19	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	s
20	Education: The lotal monthly amount that you pay for education that is either required:	
	ध as a condition for your job, or ध for your physically or mentally challenged dependent child if no public education is available for similar services.	\$ <u></u>
21	. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	<u>\$_O</u>
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.	<u>\$42</u>
23.	Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.	\$
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22A-1, or any amount you previously deducted.	

Add lines 6 through 23.

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Deblor 1 Deena A Sharp

Case number (# known) 15 - 03883-5-DMW

Ac			uctions allowed by the Mexpense allowances liste			
25.	Health insurance, disability insurance, a insurance, disability insurance, and health dependents.	and health saving savings accounts	is account expenses. T that are reasonably nec	The monthly expenses for health essary for yourself, your spouse, or you	n	
	Health insurance	\$.5
	Disability insurance	\$				- A
	Health savings account	+ \$				
	Total	\$	Contraction (Contraction Contraction Contr	Copy total here	\$_	
	Do you actually spend this total amount?	* ** ** * * ** ** ** ** ** ** **		ore:		a #
v	□ No. How much do you actually spend? □ Yes	\$				
26	Continued contributions to the care of I continue to pay for the reasonable and nec your household or member of your immedi	essary care and s	support of an elderly, chr	onically ill, or disabled member of	d: ,P_	
27.	Protection against family violence. The of you and your family under the Family Vi				\$_	
	By law, the court must keep the nature of t	hese expenses co	nfidential.			
28.	Additional home energy costs. Your hon allowance on line 8.	ne energy costs ar	e included in your non-m	nortgage housing and utilities		
	If you believe that you have home energy of housing and utilities allowance, then fill in the			costs included in the non-mortgage	47	
	You must give your case trustee documen claimed is reasonable and necessary.	lation of your actua	al expenses, and you mu	ust show that the additional amount	7	
29	Education expenses for dependent child per child) that you pay for your dependent elementary or secondary school.	children who are y	ounger than 18 years of	d to attend a private or public	\$_	
	You must give your case trustee documen reasonable and necessary and not already			ust explain why the amount claimed is		
	 Subject to adjustment on 4/01/16, and e 	very 3 years after t	that for cases begun on	or after the date of adjustment.		
30.	Additional food and clothing expense. This higher than the combined food and clothing 5% of the food and clothing allowances in the food and clothing allowances in the food and clothing allowances.	g allowances in the	e IAS National Standard		07 103_	
	To find a chart showing the maximum addi this form. This chart may also be available			pecified in the separate instructions for		
	You must show that the additional amount	claimed is reasona	able and necessary.			
31.	Continuing charitable contributions. The instruments to a religious or charitable organism.			e in the form of cash or financial	\$	
32.	Add all of the additional expense deduc	tions.			5_	
	Add lines 25 through 31.					

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Debtor 1

To	2.00	Λ	5/20-	_
1	er la	1	Oriur	()
First Name	Mickling Name	/45%51S	Last Honse	1

Case number (4 house) 15 - 03883 - 5 - DMW

Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.
--

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

					Average monthly		
	Mortgages on your home:				payment / C - L	10	
33a.	Copy line 9b here			Ç	s 635.4	<i>o</i> ケ -	
	Loans on your first two vehicles:						
33Б.	Copy line 13b here.	***************************************		(fin	d.		
	The state of the s				V. Comments and Co		
33c.	Copy line 13e here.			🧇	\$		
			- opm				
Nam		erty that secures	Does	payment le taxes or			
33d				No	\$		
			ائبا	Yes		3	
22.0				No			
33e. ₋				Yes	\$		
				100			
331.			C.i	iNo	+ \$		
30				Yes	r 49		
	7.7					Copy total	
3g. 10	otal average monthly payment. Add lines 33a through 3	3f		************	. \$	here 2	¢,
	 Go to line 35. State any amount that you must pay to a creditor, in listed in line 33, to keep possession of your property 	addition to the (called the cure	payme amou	nls nt).			
	Next, divide by 60 and fill in the information below.	181 A. 181-18					
	Name of the creditor identify property that	Tain! acces			754 WHEN NO DEC	*	
	secures the debt	-Total cure amount			Monthly cure amount	#3 625	
	secures the debt			60 =	Monthly cure	e co	
	secures the debt			60 = 60 =	Monthly cure		
	secures the debt	\$\$	_ ÷	60 =	Monthly cure	* * * * * * * * * * * * * * * * * * *	
	secures the debt	amount \$	_ ÷		Monthly cure		
	secures the debt	\$\$	_ =	60 = 60 =	Monthly cure	- Copy total	
	secures the debt	\$\$	_ =	60 =	Monthly cure	Copy total here*≫	\$
Yo		\$\$	_ ÷	60 = 60 = Fotal	Monthly cure	The state of the s	ф ф
Do you nat ar	I owe any priority claims such as a priority tax, chil	\$	_ ÷	60 = 60 = Fotal	Monthly cure	The state of the s	\$
nat ar	I owe any priority claims such as a priority tax, chil e past due as of the filing date of your bankruptcy o	\$	_ ÷	60 = 60 = Fotal	Monthly cure	The state of the s	\$
hat ar ZNo.	I owe any priority claims such as a priority tax, chil e past due as of the filing date of your bankruptcy o Go to line 36.	ss_d support, or a case? 11 U.S.C	÷	60 = 60 = Fotal	Monthly cure	The state of the s	фф
riat ar Z _{No.}	I owe any priority claims such as a priority tax, chile past due as of the filing date of your bankruptcy of Go to line 36. S. Fill in the total amount of all of these priority claims. D	s support, or a case? 11 U.S.C	÷	60 = 60 = Fotal	Monthly cure	The state of the s	ф
Z No.	owe any priority claims such as a priority tax, chile past due as of the filing date of your bankruptcy of Go to line 36. Fill in the total amount of all of these priority claims. Congoing priority claims, such as those you listed in line.	sd support, or a case? 11 U.S.C	÷ alimon : § 507	60 = 60 = Fotal	Monthly cure amount \$ + \$ \$	The state of the s	ф <u></u>
Mat ar	I owe any priority claims such as a priority tax, chile past due as of the filing date of your bankruptcy of Go to line 36. S. Fill in the total amount of all of these priority claims. D	sd support, or a case? 11 U.S.C	÷ alimon : § 507	60 = 60 = Fotal	Monthly cure amount \$ + \$ \$	The state of the s	\$\$

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Deblor 1

Deena A Sharp

Case number (1 Annual) 15 - 03883-5 - DMW

For me	ou eligible to file a case under Chapter 13? 11 U ore information, go online using the link for <i>Bankrup</i>	otcy Basics specified in the seg	parate	and the engineering and the	New Control of the Co
10000	ctions for this form, Bankruptcy Basics may also be Go to line 37.	available at the bankruptcy cie	nk's onice.		
	. Fill in the following information.		28		
Land 1 6.3.			a.		
	Projected monthly plan payment if you were filing	W Distance Company	Ъ	2	
	Current multiplier for your district as stated on the Administrative Office of the United States Courts North Carolina) or by the Executive Office for Uni other districts).	(for districts in Alabama and	×		
	To find a list of district multipliers that includes yo link specified in the separate instructions for this available at the bankruptcy clerk's office.			ing.	
	Average monthly administrative expense if you w	ere filing under Chapter 13	\$	Copy lotal	\$
	of the deductions for debt payment. es 33g through 36.				\$
Total Dedu	actions from Income				
38. Add all	of the allowed deductions.				
	e 24, All of the expenses allowed under IRS allowances	ф			
Copy line	e 32, All of the additional expense deductions	ф Ф			
Copy line	e 37, All of the deductions for debt payment	+\$			
Total dec	luctions	\$	Copy total here →		\$
1 el 10 11	Determine Whether There is a Presumpti	on of Abuse			
39. Calcula	te monthly disposable income for 60 months				
39a. C	opy line 4, adjusted current monthly income	\$			
39b. C	opy line 38, Total deductions	- \$			
	onthly disposable income, 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a.	\$	Copy line \$		
Į÷	for the next 60 months (5 years)	imianiu tarayaana asaanaana	ж 60		
39d. To	otal. Multiply line 39c by 60.			Copy fine 39d here	5
40. Find ou	t whether there is a presumption of abuse. Chec	k the box that applies:			
C) The	time 39d is less than \$7,475*. On the top of page art 5.	1 of this form, check box 1, The	ere is no presumption of a	ibuse. Go	©.
	line 39d is more than \$12,475°. On the top of pag fill out Part 4 if you claim special circumstances. The		There is a presumption of	abuse. You	
C The	line 39d is at least \$7,475°, but not more than \$	i2,475*. Go to line 41.			
* Su	ubject to adjustment on 4/01/16, and every 3 years	after that for cases filed on or	after the date of adjustme	nt,	

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Deena A Sharp	Case number (4 traver) 15 - 03883-5 - DMV
First Name Middle Flanc Last Name	
41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you fi Summary of Your Assets and Liabilities and Certain Statistical Informat (Official Form 6), you may refer to line 5 on that form.	silled out A sion Schedules 413. \$ X .25
41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2 Multiply line 41a by 0.25.	2)(A)(i)(l) \$
42. Determine whether the income you have left over after subtracting all a is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies:	diowed deductions
Line 39d is less than line 41b. On the top of page 1 of this form, check Go to Part 5.	box 1, There is no presumption of abuse.
Line 39d is equal to or more than line 41b. On the top of page 1 of the of abuse. You may fill out Part 4 if you claim special circumstances. The	is form, check box 2, There is a presumption on go to Part 5.
Give Details About Special Circumstances	
3 Do you have any special circumstances that justify additional expenses o	r adjustments of current monthly income for which there is no
reasonable alternative? 11 U.S.C. § 707(b)(2)(B).	
☐ No. Go to Part 5.	and a second distribution of
Yes, Fill in the following information. All figures should reflect your average for each item. You may include expenses you listed in line 25.	monthly expense or income adjustment
You must give a detailed explanation of the special circumstances that adjustments necessary and reasonable. You must also give your case expenses or income adjustments.	at make the expenses or income as trustee documentation of your actual
Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	d's
	\$
	\$
	\$
Sign Sciow	
By signing here, I declare under penalty of perjury that the information	n on this statement and in any attachments is true and correct.
SE Deena A Sharp Signature of Debtor 1	Signature of Debtor 2
Date 07 18 2015	Date MM/DD /YYYY

B 8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT

In 10 Deena A Sharp

Case No. 15-03883-5-DMW

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A – Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Describe Property Securing Debt:
Single family residence
Stay (for example, avoid lien e and, hopefully, reduce
Not claimed as exempt
1
D. D. Comming Dobts
Describe Property Securing Debt:
(for example, avoid lien
☐ Not claimed as exempt

B 8 (Official Form 8) (12/08)

Page 3

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

(Continuation Sheet)

PART A - Continuation

Property No.		work were		
Creditor's Name:	Descr	Describe Property Securing Debt:		
			2	
Property will be (check one):				
☐ Surrendered	☐ Retained			
If retaining the property, I intend t	O (check at least one):		*	
☐ Redeem the property				
☐ Reaffirm the debt				
☐ Other. Explain	APPENDING TO THE PROPERTY OF T	(for exa	ample, avoid lien	
using 11 U.S.C. § 522(f)).				
Property is (check one):				
☐ Claimed as exempt	□ Not o	claimed as	exempt	
E Claimet as exempt			1	
PART B - Continuation				
ART B - Continuation				
Property No.				
Lessor's Name:	Describe Leased Pro	perty:	Lease will be Assumed pursuant	
ESCOUNT OF THE PROPERTY OF			to 11 U.S.C. § 365(p)(2):	
			☐ YES ☐ NO	
Property No.				
Lessor's Name:	Describe Leased Pro	perty:	Lease will be Assumed pursuant	
			to 11 U.S.C. § 365(p)(2):	
			CLVES CLNO	

B 8	(Official	Form	8)	(12/08)

Page 2

PART B – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1			
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO	
Property No. 2 (if necessary)			
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO	
Property No. 3 (if necessary)			
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): YES NO	
	d or		
estate securing a debt and/or po	erjury that the above indicates my increase an unexpersional property subject to an unexp	ntention as to any property of my ired lease.	
Date: 7-18-15	Signature of Debtor	P	
	Signature of Joint Debtor		

B6 Declaration (Official Form 6 - Declaration) (12/17)

1u re Debtor

Case No. 15 - 03883 - 5- DMW

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	ummary and schedules, consisting of sheets, and that they are true and correct to the best of				
I declare under penalty of perjury that I have read the foregoing s ny knowledge, information, and belief.	unmary and schedules, consisting of				
Note that the second second	Deena Sharp				
Date 7-16-15	Signature:				
	Dentar				
Date	Signature:				
	(Joint Debtor, if any)				
	[If joint case, both spouses must sign.]				
DECLARATION AND SIGNATURE OF NON	-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)				
I declare under penalty of perjury that: (1) I am a bankruptcy petition p	reparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been rivings chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum				
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)				
If the bankruptcy petition preparer is not an individual, state the name, ti	itle (if any), address, and social security number of the officer, principal, responsible person, or partner				
who signs this document.					
	*				
Address					
	i i				
X	Date				
	5 AVA 5				
Names and Social Security numbers of all other individuals who prepare	d or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:				
If more than one persom prepared this document, attach additional signe	al sheets conforming to the appropriate Official Form for each person.				
18 U.S.C. § 156.	l I and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110;				
DECLARATION UNDER PENALTY OF I	PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP				
1, the [the president partnership] of the [core ad the foregoing summary and schedules, consisting of she knowledge, information, and belief.	or other officer or an authorized agent of the corporation or a member or an authorized agent of the reporation or partnership] named as debtor in this case, declare under penalty of perjury that I have ets (Total shown on summary page plus I), and that they are true and correct to the best of my				
Date	Signature:				
	[Print or type name of individual signing on behalf of debtor.]				
[An individual signing on behalf of a partnership or corporation m	ust indicate position or relationship to debtor.]				
	of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.				